

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

POWER OF ATTORNEY OR REVOCATION OF POWER OF ATTORNEY WITH A NEW POWER OF ATTORNEY AND CHANGE OF CORRESPONDENCE ADDRESS	Application Number	09/536,006-Conf. #2859
	Filing Date	March 23, 2000
	First Named Inventor	Patrick M. Phillips
	Title	INTERNET BASED CHECK CASHING AND CLEARING METHOD
	Art Unit	3621
	Examiner Name	Not Yet Assigned
	Attorney Docket No.	37202/289001: 093367

I hereby revoke all previous powers of attorney given in the above-identified application.

☐ A Power of Attorney is submitted herewith.
OR

☒ I hereby appoint Practitioner(s) associated with the following Customer Number as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith:

57956

OR

☐ I hereby appoint Practitioner(s) named below as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith:

Practitioner(s) Name	Registration Number	Practitioner(s) Name	Registration Number

Please recognize or change the correspondence address for the above-identified application to:

☒ The address associated with the above-mentioned Customer Number:
OR

☐ The address associated with Customer Number:

OR **57956**

PATENT TRADEMARK OFFICE

☐ Firm or Individual Name

Address

City	State	Zip
Country	Telephone	Email

I am the:

☐ Applicant/Inventor.
OR

☒ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) (Form PTO/SB/96) submitted herewith or filed on _____

SIGNATURE OF Applicant or Assignee of Record

Signature	<i>Prerna Gupta</i>	Date	3/2/12
Name	Prerna Gupta	Telephone	
Title and Company: Intuit Inc. Director, Intellectual Property			

NOTE: Signatures of all the inventors or assignees of record of this entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☐ *Total of 1 forms are submitted.